

LOBBYING REGISTRATION FORM

To be used for initial registrations and renewals.

Instructions

- Print in ink or type.

- Initial registrations must be submitted within 5 days of (1) employment as a lobbyist or (2) first action requiring registration. Registrations expire as of December 31 unless a renewal is submitted between December 1 and January 31.

1. NAME CONNELL REBECCA C
Last First MI

2. BUSINESSPHONE 504-988-6659
Area Code and Phone Number

3. BUSINESS ADDRESS 1430 Tulane Ave TW 34 New Orleans, LA 70112
Street and No. City State Zip

MAILING ADDRESS SAME
Street and No. City State Zip

4. EMPLOYER Tulane University Health Sciences Center

5. EMPLOYER'S ADDRESS SAME
Street and No. City State

6. LIST BELOW (a) Names of persons, groups, or organizations which you represent; (b) the address of each organization you represent; (c) the type of business each is engaged in or the purpose or function of the organization or group; (d) whether or not the client or someone else pays you to lobby.

1. Name Tulane University Health Sciences

Address 1430 Tulane Ave, TW 34 New Orleans, LA 70112

Business or purpose Health Sciences Education & Research

Does this person pay you? YES

If No, who pays you? _____

FOR OFFICE USE ONLY

Postmark Date: 12/18/04

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LOBBYING REGISTRATION
CAMPAIGN FINANCE
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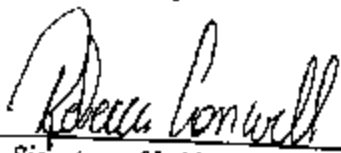
LOBBYING REGISTRATION FORM



2. Name _____
Address _____
Business or purpose _____
Does this person pay you? _____
If No, who pays you? _____
3. Name _____
Address _____
Business or purpose _____
Does this person pay you? _____
If No, who pays you? _____
4. Name _____
Address _____
Business or purpose _____
Does this person pay you? _____
If No, who pays you? _____

CERTIFICATION OF ACCURACY

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief; and that no information required by the Lobbyist Disclosure Act [LSA-R.S. 24:50 et seq.] has been deliberately omitted.



Signature of Lobbyist

